Title

The utility of coping strategies employed by mothers of children with disabilities (MCwDs) in Torwood, Redcliff, Zimbabwe: Implications on development work

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Abstract

This paper sought to examine the utility of the coping strategies employed by mothers in providing care to their children with disabilities. Data were gathered using the Ubuntu research approach through dialogue and the dare or indaba with twelve mothers from a local support group in Torwood community. In-situ primary analysis was utilised as data collection was in progress. Guided by the African strengths' theory, the study demonstrated the valuable nature of the coping strategies utilised in caregiving tasks including, selling, locking up children in the houses, acceptance and preparedness, spiritual beliefs, hope and support group in raising their children with disabilities. Evidence also revealed that the strengths of the mothers rested upon a support group, hiding from intimidating environments, support from the church and belief in faith healing. The study concludes that despite the negative experience encountered in caregiving, mothers recounted the significance of their strengths and coping mechanisms in ensuring smooth caregiving of their children with disabilities. The study then proffers a number of recommendations and some of them are Associations like the Zimbabwe Parents of the Handicapped Children Association and other advocacy groups should be involved in establishing and running more support groups in working with the mothers of children with disabilities. Development work of assisting children living with disabilities should be treated as a significant field when professionals such as social workers are being trained. This will ensure that social workers have a total understanding of the negative experiences of caregivers in their caregiving task and the role that social workers have to play in alleviating the burden of caregivers to improve the quality of care for the children with disabilities.

Key words

Caregiver, child, disability, mothers, social work, coping, strategies, strengths Torwood, Ubuntu, Zimbabwe

Key dates

How to cite this article using ASWDNet style

Introduction

The article examines the coping strategies employed by mothers of children with disabilities (MCwDs) in the Torwood community to cope with the obstacles encountered in caregiving. Mothers of children with disabilities (MCwDs) have been experiencing so many obstacles in taking care of their children with limited support services available for them (Munemo and Mwapaura, 2023). The numerous obstacles faced by these mothers have been difficult to overcome. The study reflected that external support for mothers is scarce. Mothers tend to be resilient and self-reliant. The strategies they were employing focused on enabling themselves to take care of their children with disabilities. It was because of this overwhelming responsibility that mothers of children with disabilities (MCwDs) have decided to become resilient and self-reliant in a bid to cope with their negative experiences. Using the African strength theory, a deep insight into the coping strategies employed by mothers was gained. This reflected that in the face of caregiving obstacles, mothers tried to cope with the situation by utilizing their strengths and indeed it helped them to sail through. Selling, hiding from intimidating environments, support groups, and belief in faith healing were some of the coping mechanisms that proved to strengthen the mothers. The study revealed that the self-reliance and resilience shown by the mothers of children with disabilities have implications for development in the sense that they can be involved in the development processes that are meant to enhance their well-being and improve the lives of children with disabilities.

Background

It takes a lot of commitment, work, dedication, and resources to care for a child with disabilities. The care of children with disabilities depends heavily on the mothers of those children. However, most of them encounter several challenges that prove to have an adverse influence on the mothers' social well-being and their capacity to provide care. When compared to parents of healthy children, demanding care obligations can potentially result in a mismatch in their daily activities (Young *et al*., 2020). Primary caregivers may find their roles to be particularly stressful when addressing developmental concerns of children with special needs leading to economic and social challenges (Tigere and Makhubele, 2019). Several children with disabilities in developing nations are provided care by caregivers found in impoverished places with limited access to training and skill development to provide them with the best care possible (Bizzego *et al*., 2020).

Children with disabilities end up receiving inadequate care, which has an immediate impact on how well they function. Research on Zimbabwean mothers of children with disabilities is also limited, even though previous studies indicate a high prevalence of children with disabilities in Zimbabwe. Again, the social work profession has a responsibility to provide necessary services, support, and resources to vulnerable populations, like people with disabilities (and their caregivers), however, this obligation is frequently undermined (Mutale, 2020). Guided by the resilience theory, the study therefore seeks to examine the coping strategies employed by mothers of children with disabilities in the Torwood community.

Theoretical framework

African strengths theory

The African strength theory was adopted for this study. This theory posits that if a person focuses on things, he/she can do better or those things that he /she has, that person will succeed because that is where his/her strength lies. If a person wants to follow others, he/ she will fail because that is not his/her domain. This theory is the opposite of the deficit perspective that has been used by outsiders in Africa. According to African Social Work Network (2021), the African strengths theory is found among the green group of theories which embraces theories that are considered safe and useful in the realm of African social work. In Carlson's 2019 study, he found out that when caregivers of children with cerebral palsy become resilient, they are empowered, have strength, and have the capacity to provide care to their children. Within the context of rendering care to children with disabilities mothers in the Torwood community have managed to utilize their strengths in a bid to bounce back in the face of their burdensome journey of taking care of their children. They have chosen to become resilient and self-reliant, capitalizing on their strengths rather than focusing on their negative characteristics. Utilizing this theory mothers have been seen as resourceful and resilient in the face of their adversity. In the current study mothers of children (MCWD) with disabilities employed some coping mechanisms like hiding from intimidating environments, selling, belief in faith healing, acceptance, and locking up children in houses.

Literature review

The study conducted a scoping review on scholarly electronic databases such as African Journals Online, Google Scholar, and Research Gate. The process included articulating the research question, identifying key concepts and keywords, and setting criteria for source inclusion or exclusion (considerations included publication dates, source types, geography, and population).

Khan *et al*., (2020) assert that caregiver support groups can help caregivers of children with disabilities develop coping mechanisms. The Caregiving model by Mcdonald *et al*., (1997) which emphasizes on the importance of external factors in ensuring smooth caregiving, and support groups are one of the external factors seen as mediators of caregivers and their children with disabilities. Because caregivers are positively influenced by a support group and are inspired to

do more for their children, the impact of a support group cannot be overstated (Taderera & Hall, 2017).

Zuurmond *et al.*,'s (2018) study on support programs for parents of children with disabilities found that support groups assist in an efficient manner. According to an observation (Bringham, 2017), the caregivers can recognize through the support group that, despite being difficult, having a child with special needs is not at all a death sentence. The Ubuntu perspective encourages unity, cooperation, teamwork, and group support. According to Mupedziswa *et al.*, (2019), the Ubuntu worldview is based on a strong sense of community or extended family membership. Musich *et al.*,'s (2018) observed that caregiver preparedness increases hopeful feelings and enhances caregiver health generally and can be viewed as a strong coping mechanism. A sense of fulfillment was one of the good features of caregiving, found by Khan *et al.*, (2020). Ditlhake and Maphosa, (2021) shared principles of Ubuntu such as humanness, empathy, and human dignity were used by caregivers reflecting their acceptance of the care of persons with disabilities. In a study done in Pakistan by Furrukh and Anjum, (2020) the escape strategies were revealed as a complete avoidance of any social gatherings, and a failure to pay attention to the opinions and reactions of those around them. Mkabile *et al.*, (2021) discovered that study participants were anxious about leaving the house with their children and felt humiliated and embarrassed by their children's conditions.

They felt the need to keep the issue a secret from the locals. According to Aldersey and Ahmed (2020), mothers in Addis Ababa stressed the value of their spiritual values, family and community support, and hope in their coping mechanisms in caring for children who have intellectual and developmental challenges. Many of the mothers reported that their faith in God had strengthened them (Aldersey and Ahmed 2020). Antwi's (2023) study in Ghana highlighted that the use of family support systems and social support which includes the churches and spirituality were the main coping mechanisms for the parents in the study. Asa's study reported using financial strategies such as selling family assets to cope with economic challenges. In a research by Mwapaura and Chikoko (2021), they found that coping mechanisms employed by Persons Living with Disabilities Induced by Road Traffic Accidents in Zimbabwe were useful in enabling them to cope with their challenges.

Literature included in the literature review

Table 1: Articles included in the review

Title	Author	Year	Brief Summary
The unplanned journey: challenges of parents of children living with disabilities in Ghana	Antwi, T	2023	The study looked at the challenges faced by parents in raising a child with a disability which involved loneliness, physical exhaustion, and problems with money. The study went on to look at the coping mechanisms employed by the parents to cope with the challenges they were facing
Needs of families of children with intellectual and developmental disabilities in Addis Ababa.	Aldersey, H.M., Ahmed, A.N., Tesfamichael, H.N. and Lotoski, N	2020	The article looked at the obstacles that parents of children with intellectual and developmental disabilities encountered in taking care of their children. It then looked at their needs and the coping mechanisms they employed to be able to provide care
Service Providers's perceptions of Families Caring for children with disabilities in Resource-poor settings in South Africa	Khan, Isaac, Makoae. Mokhele and Mokkomane.	2020	The study revealed that providing services to the caregivers was crucial to ease the burden of caregiving
The Nature and Efficacy of Coping Mechanisms Employed by Persons Living with Disabilities Induced by Road Traffic Accidents in Zimbabwe	Mwapaura, K and Chikoko, W	2021	The study looked at the effectiveness of the coping strategies employed by persons living with disabilities induced by road traffic accidents in Zimbabwe. Some of the strategies were getting external support, receiving medical treatments, and receiving rehabilitation.
A critical review of resilience theory and its relevance for social work.	Van Breda	2018	The article looked at the process of resilience and how people can bounce back in the face and wake of adversity.
'A burdensome Journey': The Plight of mothers of Children with disabilities in Torwood Community Kwekwe, Zimbabwe	Munemo, W and Mwapaura, K	2023	The article explores the challenges faced by mothers of children with disabilities in taking care of their children with disabilities in the Torwood community. This was seen as a burdensome journey as mothers were rendering care with little or no support.

Methodology

The study adopted the African research methodology (ARM) punctuated by the Ubuntu research approach (URA). Khupe and Keane, 2017 argue that ARM values African ways of collecting and analyzing data. URA entails applying Ubuntu principles when researching including using Ubuntu philosophy, knowledge, theories, ethics, and techniques (Mugumbate, 2020). This article aimed at exploring the coping mechanisms of mothers of children with disabilities in the Torwood community, Kwekwe Zimbabwe. Ubuntu has been embraced on disability studies by scholars such as Mwapaura (2021), Mwapaura, Magavude, *et al.*, (2022) and Mamukeyani (2023).

Data were gathered using the dialogue approach and the *dare* or *indaba* method among twelve mothers who were humanely selected from a local support group in the Torwood community. As this research was driven by the Ubuntu philosophy it included the use of the local languages approach (LLA) in which local languages were used in seeking consent. The researchers also collected data and communicated the findings using languages that mothers understood. In as much as the Ubuntu-driven research values humane approaches and discourages cheating, deceit, harm, disrespect, and injustice (Mugumbate, 2020), the researchers therefore conducted the research in line with the ethical requirements of the total agreement technique (TTAT) whereby the researchers were granted permission to conduct the study by the Ministry of Public Service Labor and Social Welfare and the Redcliff Town Council. Consent from the participants has been obtained in the preferred way.

Using the TTAT ethics have been noted, discussed, resolved, and agreed upon. The Munyai approach in the Ubuntu philosophy was also utilized when the researcher utilized an intermediary who was the chairperson of the Tsungai mother support group to approach mothers of children with disabilities. Twelve (12) mothers of children with disabilities from the Tsungai support group were selected. Having a support group in place was convenient for the researchers because the participants were easily accessible. The inclusion criteria for study participants consisted of those mothers who were part of the Tsungai mother support group and mothers of children with disabilities who were not part of the support group were excluded.

Key informants were selected due to their desirable characteristics. These were a Social Development officer in the Department of Social Development, a Kwekwe-based leader of the Zimbabwe Parents of the Handicapped Children Association, a social worker, and Chairperson of the Tsungai support group. The in-situ primary analysis was used as the analysis was done as data was collected and the main themes obtained include, hiding from intimidating environments, selling, belief in faith healing, acceptance, and locking up children in houses. Debriefing and aftercare were done after the research. This is in line with Ubuntu philosophy which emphasizes on the importance of communicating the findings to the participants using their local languages. Ugwu et al.,

(2020) define debriefing as a conversational session focused on exchanging and analyzing information after a specific incident has occurred.

Findings

Different coping strategies have been used by mothers of children with disabilities to alleviate the difficulties they are experiencing. Some of the coping mechanisms highlighted were support from the churches, selling, support groups, avoiding intimidating environments, and caregiver acceptance and preparedness.

Support groups

Nearly every participant said they go to a support group at least once per week. Participants highlighted that the use of a group positively influenced their caregiving experience. Since the support group was comprised of all participants, they indicated that they came to share their experiences, and understand the challenges that were faced by one another hence providing support and encouraging each other most of the time. Participants also highlighted how the support group serves as a consoling factor to relieve stress. Many participants also shared the same sentiments on how their support group helped them to cope with their experiences.

One of the participants reflected on the importance of a support group she said:

Zuva iroro ratinosangana mamai ane vana vane hurema rinounza shanduko muhupenyu hwangu. Ndinenge ndichinzwawo mamwe madzimai achitaura matambudziko avo, amwe anotodarika angu ende zvinondibatsira kugamuchira dambudziko rangu randiri kusangana naro." (P10).

(That single day per week that we meet as mothers of children with disabilities, brings a difference in my life. I will be hearing other people sharing the same problems and some of them were even worse and that made me look at my situation differently).

One of the key informants also highlighted the importance of a support group and she said:

Of late there has been a programme which was being implemented by the Zimbabwe Parents of the Handicapped Children Association. So, the mothers are furnished with the necessary information that they require to take good care of their children with disabilities. This program was there to encourage support groups, so when these support groups were formed mothers shared ideas, they share their fears, and experiences. In those support groups, the mothers are furnished with the necessary information that they require to take good care of their children with disabilities. Support group is a coping mechanism that is very beneficial to both the mother and the child as some fears are unpacked and some of their issues are addressed, they are also empowered as they can isles (mikando). Also, each time they do support

meetings they are paid, some of them will be in a catering club providing catering services at any given meeting organised by Zimbabwe Parents of the Handicapped Children Association. So, with that money they will do mukando, some will start small projects to improve their economic livelihoods." (K3)

Echoing the same sentiments, another key informant said:

I think what they can do is to come together, then vaka former a group it is easier for a group to advocate on behalf of others than it is for an individual. For example, if they want to engage the city council to improve services like water services in Torwood, it is easier for a group than an individual to do that. Also, kuvamo mugroup ikoko, will assist them to have education on various issues and vachidzidzisana kudaro. Plus, kuwana way yekuita ma income generating projects in those groups (K1).

Caregiver acceptance and preparedness

The mothers reported acceptance and preparedness as a way of coping with the challenges they encountered in the caregiving task. Mothers were better equipped to handle the situations of their children once they began to embrace them for who they are. Most women in this study spoke of their readiness after embracing their children with disabilities. Mother's preparedness in this study reflected their readiness for performing all caring tasks necessary to fulfill their position as a caregiver. Most women noted that accepting a child with a disability is necessary for raising the child and enhancing preparedness and patience. Eight of the mothers indicated that their acceptance and preparedness came about due to their own experiences of having family members living with disabilities. One of the mothers had this to say:

...ndakatoona kuti kuchengeta mwana ane hurema kunoda moyo murefu. Mwana wangu paakaonekwa hurema na Chiremba ndakabva ndazviudza kuita moyo murefu pamwe chete nokuita zvinofanira kuitirwa mwana ane hurema hwakadai. Zvakare ndakabva ndanzwisisa nokugamuchira kuti mwana ane hurema anoda kubatwa zvakanaka semabatirwo anongoitwa vana vasina hurema (P4).

(...... I saw that caring for a child with a disability requires patience. When the doctor identified my child's disability, I told myself to have patience and perform all that is supposed to be done to a child with this type of disability. Also, I came to understand and accept that a child with a disability needs great care like any other child without disabilities)

Hiding from intimidating environments

Participants mentioned that one coping strategy they used to deal with stigma and prejudice was to avoid intimidating surroundings. Participants agreed that they avoid certain places where they receive silly, bad, and embarrassing comments from strangers and members of extended families. They had to stop visiting members of the extended family, and avoid going to public places when many people will be attending programmes. The participants also highlighted that

they confined themselves in their houses and avoided such meetups and gatherings. One of the mothers in the current study said:

Ndakange ndakuzviudza kuti handiende pakazara vanhu nemwana wangu nekuti vanhu vaitaurisa plus vamwe nekutosema chaiko, saka ndaizvigarira pamba pangu, ndotoavoider vanhu (P5).

(I began to tell myself that I don't go where many people will be gathering with my child because people were passing many comments and were uncomfortable associating with my child, so I chose to stay at my house to avoid people)

Support from the church and belief in faith healing

Participants reported on the support they received from their churches. Participants reported that attending church relieved them of their stress as they met people who were willing to help them. Some participants indicated that their children had disabilities because they were bewitched. So, most of them came to join the apostolic sects, with the hope that prophetic power was going to cure their children. Participants also indicated that prayer helped them in times of distress and to manage the challenges of raising and caring for their children. They stated that god knows the best, so they leave everything in God's hands and hope for the best.

One of the participants reflected on her belief in faith healing and she said:

Mwana wangu akanamatirwa nemutumwa waMwari vakati kudonha kuchapera"saka ndinovimba kuti hapana chinoramba na Jesu (P6).

(My child was prayed for by the Messenger of God, and he said epilepsy will vanish, so I hope Jesus will seek out things for me)

Echoing the same sentiments, the other participant stated:

People despise apostolic sects because they have not encountered a difficult situation. I realized that the mental illness of my child was associated with something. So, I decided to go and seek faith healing from apostolic sects. So, I hope my child will be ok. I am also thinking of fasting for my child (P11).

Another participant also stated the role of the church as a coping mechanism, and she had this to say:

Vamwe vatenderi pamwe chete na Fata vanondibatsira chaizvo. Vanotishanyira uye nekugara vakaita Misa kumba kwedu. Vanondibatsirawo nemari pavanenge vagona. Ndinzvitenda zvikuru (P4).

(My church members and the Priest are a very strong source of support; they visit us, they frequently conduct section mass at our house, and also give us some financial support whenever they can. I appreciate this)

Locking up children in houses

The participants indicated that the financial constraints they faced left them with no option but to lock their children inside the house and go to sell their things or do piece jobs. Key informants also concurred with the participants. However, this was not fair, especially for those children with severe Cerebral Palsy and Epilepsy who needed constant monitoring. As highlighted in the findings of this research every participant had other economic activities that they tried to engage in so that they could take care of the family. For those who do piece jobs, they leave the child locked inside the house.

One of the participants had this to say:

Kana ndikadeedzwa kuti ndiwachire munhu kana kunocleaner nekuchera mvura, handigone kutakura mwana wangu. Saka ndinomukiira mumba ndonoita basa riya ndodzoka. Asi handiwanzotora hangu nguva nekuti ndinoziva kuti ndasiya mwana. Pamwe pacho ndinoita door to door ndichitengesa cobra ne dish wash (P7).

(If someone calls me to wash clothes, clean the house, or fetch water, I am not able to go with the child. So, I have no option but to lock the child inside the house till I return home. But I won't take long because I know I would have left a child. At times I move door to door selling cobra and dish wash)

Another participant also echoed on the above sentiments, and she had this to say:

Ndakambotanga ndichitengesa musika wangu pamba, ndobva ndaona kuti vanhu vaiuya vashoma, ndikati zano kutoenda kumarket kune vamwe ndiwane mari kuti ndikwanise kuriritira vana. Saka mukomana ndinomukiira mumba ndoenda, vakoma vake kana vadzoka kuchikoro votamba naye. Hapana zvandingaite. Ndikangogara tinofa nenzara (P8).

(I started selling my things at home then I realized that few people were coming to buy. Then I thought of another idea of going to the market where others were doing business. I wanted to find money to take care of the children. So, I would lock the boy inside the house and go, when his brothers come from school they will play with him. I do not have any option, if I sit down and watch we will die of hunger)

One of the key informants concurred with the above sentiments and she said:

For a mother to go and look for money, there is nowhere to leave the child with a disability. No one wants to be associated with such children, so the option that will be left for these mothers is to lock up their children in houses (K3).

Selling

Participants highlighted that they were able to cope with financial challenges through selling cobra, dishwasher, roasted dried maize, and other food staff. They also highlighted the major contributions of the leader of their support group in teaching them how to make cobra, dishwasher, bubble bath, and toilet cleaner for selling.

One of the participants cited selling as one of her coping mechanisms she said:

Ndinotengesa cobra ne dish washer. Ndinoda kutenda gogo vanotibatsira musupport group medu kuti dzidzisa kubika cobra ne dish washer saka ndinozvibikira ndotengesa, pashoma pandawana ipapo pari kundibatsira kuchengeta vana vangu kusanganisira ane hurema (P7).

(I am selling cobra and dishwasher. I want to thank Granny for assisting us in our support group on how to make cobra and dishwasher. So, I make it for myself and then sell. The little that I get helps me to take care of my children, including this one with a disability)

The other participant also concurred with the above participant indicating that selling was one of her coping mechanisms and she said:

Ini ndinongotengesa maputi ndiwo anoita kuti titorarama. Zvakare takadzidziswa kubika cobra ne dish washer nagogo. Saka ndikabika ndinotengesera vanhu zvakare. Zvinombotibatsira asi pamwe pacho tinogona kushaya mari yekutanga zvekubikisa (P1).

(I sell dried roasted maize to earn a living. Also, we were taught how to make cobra and dishwasher with granny. So, after preparing the cobra and dishwasher I can sell them to people. It is helpful to us but at times we fail to purchase ingredients for making the products)

Similarly, another participant said:

Ndinotengesa musika wangu wandinoisa zvekudya, maslippers. Ndinozoisa nedishwasher necobra zvandinogadzira. Dzimwe nguva pakaita ane piece work anondideedza ndomuitira, zvakaita sekuwachira munhu kana kumucherera mvura sezvo muno muTorwood mvura ichinetsa (P3).

(I sell food staff, slippers at an informal market. I also sell cobra and dishwasher that I would have made for myself. Sometimes if there is someone who wants me to do piece work for her, I can do that for example washing and fetching water since in Torwood getting water is a challenge).

A key informant also offered her views on how mothers of children with disabilities can cope with economic challenges and she had this to say:

Since these mothers are faced with economic challenges, most of them are engaging in selling to earn a living. Like the one anogara ari pa Topics mutown selling things with her child ane hydro (K1).

Discussion

Support group

As highlighted in the above sentiments, it can be noted that the support group serves as a substitute for family support; it is especially useful when the family is not providing support to mothers of children with disabilities (MCwDs). In agreement with the aforementioned, Khan *et al*., (2020) assert that caregiver support groups can help caregivers of children with disabilities develop coping mechanisms. As highlighted by the African strengths theory if a person focuses on those things that he /she has, that person will succeed because that is where his/her strength lies. This then relates to how mothers utilised their available support group to strengthen them and enable them to bounce back in the face of caregiving adversity. Through the help of a support group the problems encountered in caregiving were lessened. Because caregivers are positively influenced by a support group and are inspired to do more for their children, the impact of a support group cannot be overstated (Taderera & Hall, 2017).

Thus, group support enhances the quality of caregiving experiences, which eventually benefits children with disabilities. This conclusion is supported by Zuurmond *et al*.,'s (2018) study on support programs for parents of children with disabilities, which found that support groups assist in an efficient manner. According to an observation (Bringham, 2017), the caregivers can recognize through the support group that, despite being difficult, having a child with special needs is not at all a death sentence. As a result, it serves as a useful coping technique and an affordable substitute for therapy and counseling for parents of children with disabilities. For caregivers who are frequently socially alienated from their communities, support groups offer a crucial social safety net. This is also consistent with the Ubuntu perspective, which encourages unity, cooperation, teamwork, and group support. The Ubuntu worldview, according to Mupedziswa *et al*., (2019), is based on a strong sense of community or extended family membership.

Caregiver acceptance and preparedness

The aforementioned findings suggest that mothers accepted the limitations of their children with disabilities, which improved their readiness to provide care for the children. The mothers who provided care for their children with disabilities have shown acceptance, readiness, contentment, and success as they believed they were making a significant impact. This is consistent with Musich *et al*.,'s (2018) observation that caregiver preparation increases hopeful feelings and enhances caregiver health generally. Being well-prepared to render care, the mothers of children with disabilities reported feeling less stressed and burdened, which helped them to cope with the challenges of caregiving. African strength theory focuses on what an individual is capable of doing in the face of any obstacles and this also ultimately lies in his or her inner strengths. In the current study acceptance of the child with

a disability and preparedness to render care proved to be inner strengths that really helped the mothers to be resilient. A sense of fulfilment was one of the good features of caregiving, found by Khan *et al*., (2020). The positive aspects of caring may be balanced out by the role's personal fulfilment reward, which would maintain motivation to perform this duty despite its challenges. Ditlhake and Maphosa, (2021) 's principles of Ubuntu such as humanness, empathy, and human dignity are also linked to this finding as mothers believed in the goodness of accepting their children with disabilities and being prepared to help them. This also reflected that these mothers respected the human dignity and worth of their children with disabilities, thus concurring with the values of social work which are the intrinsic worth and value of a human being.

Hiding from intimidating environments

From the sentiments given above it is clear that participants have typically excluded themselves from every aspect of community social life as a result of stigma and discrimination. However, such stigma was against the National disability policy of June 2021 which prohibits discrimination against people with disabilities. Again, avoiding going to public places was causing these mothers to be left out of community programs that were meant to benefit everyone. In this case, one might argue that although 'leaving no one behind' as a key principle of NDS1 entails the inclusion of everyone in development processes even at the community level the inclusion of these mothers was doubtful because of stigma and discrimination.

Section 56(3) of the Zimbabwean constitution stipulates that…Every person has the right not to be treated in an unfairly discriminatory manner on such grounds as language…sex, gender, marital status, age… disability. However, the stigmatization and discrimination of mothers and their children acted against what the constitution stipulates. The results are consistent with those of Mkabile *et al*., (2021), who discovered that study participants were anxious about leaving the house with their children and felt humiliated and embarrassed by their children's conditions. They felt the need to keep their children's disabilities a secret from the locals because they were discriminated and stigmatized. In a study done in Pakistan by Furrukh and Anjum, (2020) the escape strategies were revealed as a complete avoidance of any social gatherings, and a failure to pay attention to the opinions and reactions of those around them. This strategy appeared to be the mothers' preferred coping strategy, and this is in line with the African strengths theory which emphasizes the individual capacity for resilience, resistance, and thriving in the face of problems. Mothers in the current study had to find coping and adjustment strategies to rebound from the challenges of caregiving and hiding from intimidating environments became the copying and adjustment strategy.

Support from the church and belief in faith healing

The sentiments given by the participants reflect their belief in faith healing and prayer. God was the answer to their

challenges. This concurred with a study that was done by Aldersey and Ahmed (2020) in Addis Ababa where mothers of children who have intellectual and developmental challenges stressed the value of their spiritual values, family and community support, and hope in their coping mechanisms. Many of the mothers reported that their faith in God had strengthened them (Aldersey and Ahmed 2020). It is crucial to note that the capacity for thriving at any given time reflects the possibilities that arise from many interacting systems, and this proves to be strengths and resources found both within the individual and in the contexts that surround the individual at the time. In the current study, the church was identified as one of the interacting systems that affected the capacity of mothers to respond to their challenges successfully. Antwi's (2023) study in Ghana highlighted that the use of family support systems and social support which includes the churches and spirituality were the main coping mechanisms for the parents in the study. In a study by Mwapaura and Chikoko (2021), people with disabilities trusted in God to cope with day-to-day struggles. However, a closer look at the sentiments of mothers seeking faith healing would suggest that joining an apostolic sect to seek healing can have repercussions for the child if the mothers stop giving the child drugs because of apostolic beliefs.

Locking up children in the houses

A closer analysis of the accounts given by parents reflects that these actions by mothers were exposing children to emotional and behavioral threats, thus depriving children of their right to be protected from abuse as stipulated in section 81 of the Constitution of Zimbabwe. Depriving children of their rights is against the rights-based model of disability. The right to be protected from emotional abuse was not ensured in this case, yet the rights-based model emphasizes that people have the obligation and responsibility to protect and promote the rights of persons with disabilities. The Children's Act (5:06) states that a child in need of care is a child with a disability. However, this act of locking children in houses was against the provision of proper care. This was not possible for the mothers who highlighted that they had no option but to leave their children locked up to go and find money to fend for the children. Although this became a coping strategy for the mothers as it strengthened them in their provision of care to children with disabilities, a closer analysis would suggest that the strategy tends to be harmful to the children.

Selling

The above findings reflected selling as a coping mechanism employed by mothers of children with disabilities (MCwDs). A study done by Asa *et al.*, (2021) in Indonesia supported the strategy of selling. Participants in Asa's study reported using financial strategies such as selling family assets to cope with economic challenges. Tome (2022) observed that young women with disabilities can be seen on the streets of the Mashonaland Region towns begging or illegally vending their goods. Selling as a coping mechanism helps to obtain some money to take care of the family. As in line with the African strengths theory, the mothers have chosen to utilize

their capabilities, marketing, and advertising skills to become self-reliant through selling to cope with the challenges they were encountering in providing care to their children with disabilities. This mechanism is in support of the Zimbabwe's Small and Medium Enterprises policy which supports the engagement of people in activities that generates income. Ministry of Women Affairs, Community, Small and Medium Enterprises also supports SMES by women. The Women's bank is offering loans to women to start their projects. However, it is so disturbing that the mothers of children with disabilities (MCwDs) in this study are unaware of such initiatives by the government.

Implications for development

The development workers especially social workers need to collaborate with mothers of children with disabilities, their families, and communities to discover and generate hopes and opportunities, mobilize inner and environmental strengths and resources, and act for the empowerment of these mothers. Development workers should advocate for MCwDs. Similarly, the Development workers must also conscientize MCwDs about government initiatives available to empower women in Zimbabwe. Adequate knowledge about the challenges and coping mechanisms of the mother of children with disabilities (MCwDs) will ensure that development workers work towards improving the well-being of these mothers. Knowledge obtained from this study is significant in informing further training for development students and practitioners on ways to address the challenges encountered by caregivers of children with disabilities.

Recommendations

- The research recommends that there is a need for more research studies by development workers especially social workers that will look into the efficacy of coping strategies employed by caregivers of children with disabilities.
- The study was conducted in the Torwood community which is in the Redcliff town council it is therefore respectfully recommended that similar research must be done in rural communities.
- The study looked at the utility of coping mechanisms of MCwDs it is therefore recommended that research needs to be done on mothers of children with specific disabilities for example mothers of children with Cerebral palsy.

Conclusion

The main aim of the research was to explore the usefulness of coping strategies utilized by MCwDs in the Torwood community. The coping mechanisms obtained include selling, hiding from an intimidating environment, belief in faith healing, and support groups. Utilizing the African theory the mothers of children with disabilities (MCwDs) managed to utilize their inner strengths and available systems

and resources in the environment to bounce back in the face of caregiving obstacles. The ability to cope that was portrayed by mothers implies that in developmental social work mothers' capabilities and abilities can be utilized in as far as improving their well-being is concerned. This then entails involving mothers of children with disabilities in decisions that affect their lives and the lives of their children.

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